and the state of			PTO/SB/21 MODIFIED BY AT&T CORF
10,000		Application Number	10/090544
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FORM		First Named Inventor	James David Johnston et al.
be used to all correspondence after in	nitial filing)	Group Art Unit	2641
		Examiner Name	Not Yet Assigned
Total Number of Pages in this Submission	n	Attorney Docket Number	1999-0660
Fee Transmittal Form Fee Attached Amendment / Response After Final Affidavits / Declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts under 37 CFR 1.52 or 1.53 Response to Missing	Cover Drawin Drafts Licens Petitio Applio Powe Chan Addre Termi Reque	sing-related Papers on to the Commissioner on to Convert a Provisional cation or of Attorney, Revocation ge of Correspondence ess inal Disclaimer est for Refund	After Allowance Communication to Group Appeal Communications to Board of Appeals and Interferences Appeal Communications to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Return Receipt Postcard CD, Number of CDs Additional enclosure(s) (please identify below)
Parts/Incomplete Application	Remarks	CORRESPONDEN	ICE ADDRESS
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

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AT&T CORP. P.O. Box 4110

United States of America

Thomas M. Isaacson

Middletown

**ADDRESS** 

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	Filing Date	03/04/2002				
	First Named Inventor	James David Johnston et al.				
	Examiner Name	Not Yet Assigned				
	Group/Art Unit	2641				
	Attorney Docket No.	1999-0660				

OF PAYMENT Attorney Docket No. 1999-0660							
METHOD OF PAYMENT (check one) FEE CALCULATION (continu						continued)	
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1001 750	Utility(37CFR 1.53(b)) / CPA(37CFR 1.53(d)) Filing Fee		1252	410	Extension for response w month	ithin second	
1002 330	Design Filing Fee		1253	930	Extension for response w	ithin third	
1004 750	Reissue Filing Fee		1254	1450	Extension for response w	ithin fourth	
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Г	SUBTOTAL (1) Filing Under 37CFR 1.53		1403	280	Request for oral hearing		
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1202 18	Claims in excess of 20		1806	180	Submission of Information Statement	n Disclosure	
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** or number previously paid, if greater; for Reissues, see above							
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Printed Name	Thomas M. Isaacso	on T				Number 441	166
Signature	DuBran	Date	mar	5, 200	Deposit Account	User ID	
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